2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000158509

Entity Name: LOLO CONSULTING INC

FILED May 12, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

100 BAYVIEW DR. #1824 100 BAYVIEW DR. #2108

SUNNY ISLES BEACH, FL 33160 SUNNY ISLES BEACH, FL 33160

Current Mailing Address: New Mailing Address:

100 BAYVIEW DR. #1824 100 BAYVIEW DR. #2108

SUNNY ISLES BEACH, FL 33160 SUNNY ISLES BEACH, FL 33160

FEI Number: 65-0801854 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CHANDIA, LEONOR SPL INCOMETAX CORP 6006 RADIO RD 100 BAYVIEW DR #2108 NAPLES, FL 34104 US

SUNNY ISLES BEACH, FL 33160 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: FERNANDO ODE 05/12/2009

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition GRACIA, GEORGINA Name: Name: CHADIA, LEONOR 100 BAYVIEW DR #2108 100 BAYVIEW DR #2108 Address: Address: City-St-Zip: SUNNY ISLES BEACH, FL 33160 City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: VΡ (X) Delete Title: () Change () Addition

CHANDIA, LEONOR Name: Name: 100 BAYVIEW DR #2108 Address: Address: SUNNY ISLES BEACH, FL 33160 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Ρ SIGNATURE: LEONOR CHANDIA 05/12/2009